Approved for use through 7/31/2006 OMB 0651-0032 U.S. Palant and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paparwork Reduction Act of 1895, no persons are required to respond to a collection of inform PATENT APPLICATION FEE DETERMINATION RECORD tion untere & displays a valid CMS control surnbar. Application or Doctor Number Substitute for Form PTO-875 Effective December 8, 2004 10 537,82 APPLICATION AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR MUMBER FILED NUMBER EXTRA BASIC FEE RATE (1) FEE (I) RATE (S) FEE (1) (37 CFR 1 15(4) (b) @ (c)) NIA M/A AUS 150.00 NIA 300.00 SEARCH FEE NVA 137 CFR 1 10(1), \$1, 00 (MI) 84/4 N/A \$250 NA **EXAMINATION FEE** \$500 NA (3) CFR 1 16(0). (0). (d) NIA \$100 NZA \$200 TOTAL CLADES (37 OFR 1 16(1) mnus 20 = X\$ 25 X\$50 INDEPENDENT CLAIMS OR (37 CFR 1 16(h)) mous 3 e X100 X200 If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each (37 OFR 1 (8(4)) additional 50 sheats or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a) MULTIPLE DEPENDENT CLAIM PRESENT (37, CFR 1 16(0) +180-+360-" If the difference in column 1 is less than zero, anier "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II Pretmet (Column 1) (Column 2) OTHER THAN (Column 3) OR SMALL ENTITY SMALL ENTITY CLAIMS HIGHES! REMAINING /જુ NUMBER PRESENT RATE (5) AFTER PREVIOUSLY ADDI-RATE (\$) AMENDMENT EXTRA ADOI-MENDWENT TIONAL PAID FOR TIONAL FEE (5) Total Minus 27 FEE (1) X\$ 25 XSS0 . OR Minus X100 X200 Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (07 CFR 1.16Q) +180= +360= TOTAL TOTAL ADD'T FEE OR ADD'L FEE (Column 1) (Cotumn 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT lay RATE (5) AFTER ADOI-PREVIOUSLY RATE (\$) EXTRA ADOL AMENOMENT TIONAL FEE (3) PAID FOR TIONAL Total 26 Minus FEE (5) (37 CFR 1,160) XS 25 X\$50 OR DT CFR L 1400 Minus X100 X200 Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(2) +180= +360a OR TOTAL TOTAL If the entry is column 1 is less than the entry in column 2, write "V" in column 3.

If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

The highest number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. ADDI FEE OR ADD'L FEE collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

To process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to comp or process an apparature, constraint as governor by so u.s.o. 122 and 37 cms, 1,14, 1165 constraint is essential to time 12 minutes to complete application form to the USPTO. Time will vary depending upon the individual case. Any comments amount of time you require to complete this form and/or suggestions for reducing this burdon, should be sent to the Chief Information Officer, U.S. Parient ramount or time you require to complete this torin end/or suggestions for reducing this burden, should be sent to the Chief intermetion Officer, U.S. Peters indemnit Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, QO NOT SEND FEES OR COMPLETED FORMS TO THIS ESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1450.